## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	06/03/2007	Address:	101 Carrie Lane	
Case #:	96F02357		Columbus, IN	
County:	Bartholomew		Bartholomew	
Type of Laboratory Seizure (check one)  Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location (considerate   Residence   Outbuilding   Vehicle	check all that apply)  Motel/Motel Open — No Structure Other:	
Ceheck all the   Lithium   Red Pho   Elamma   Water R   Anhydroch   Corrosiv   Corrosi	at apply)  /Ammonia Reaction(s): Bathroom  osphorous/Iodine Reaction(s):  ble Solvents: Bathroom  eactive Metal (Lithium): Bathroom  ous Ammonia:  cloric Acid Gas Generator(s): Bathro  re Acid: Bathroom  re Base:  em and location):  eactive and and location):	-		
Child under age 18 discovered (check one)  Yes (number present)  No  *If yes, fax report to Child Protective Services  This report is to be faxed to the following agencies the Department: Columbus		☐ Ephedrine ☐ Retail/Me ☐ Other: <u>Tip</u> acies that serve the lo  Fax:		
	rtment: <u>Bartholomew</u> tion Service: <u>Bartholomew</u>	Fax:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Harshman Phone 3178998583				

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 bours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.